

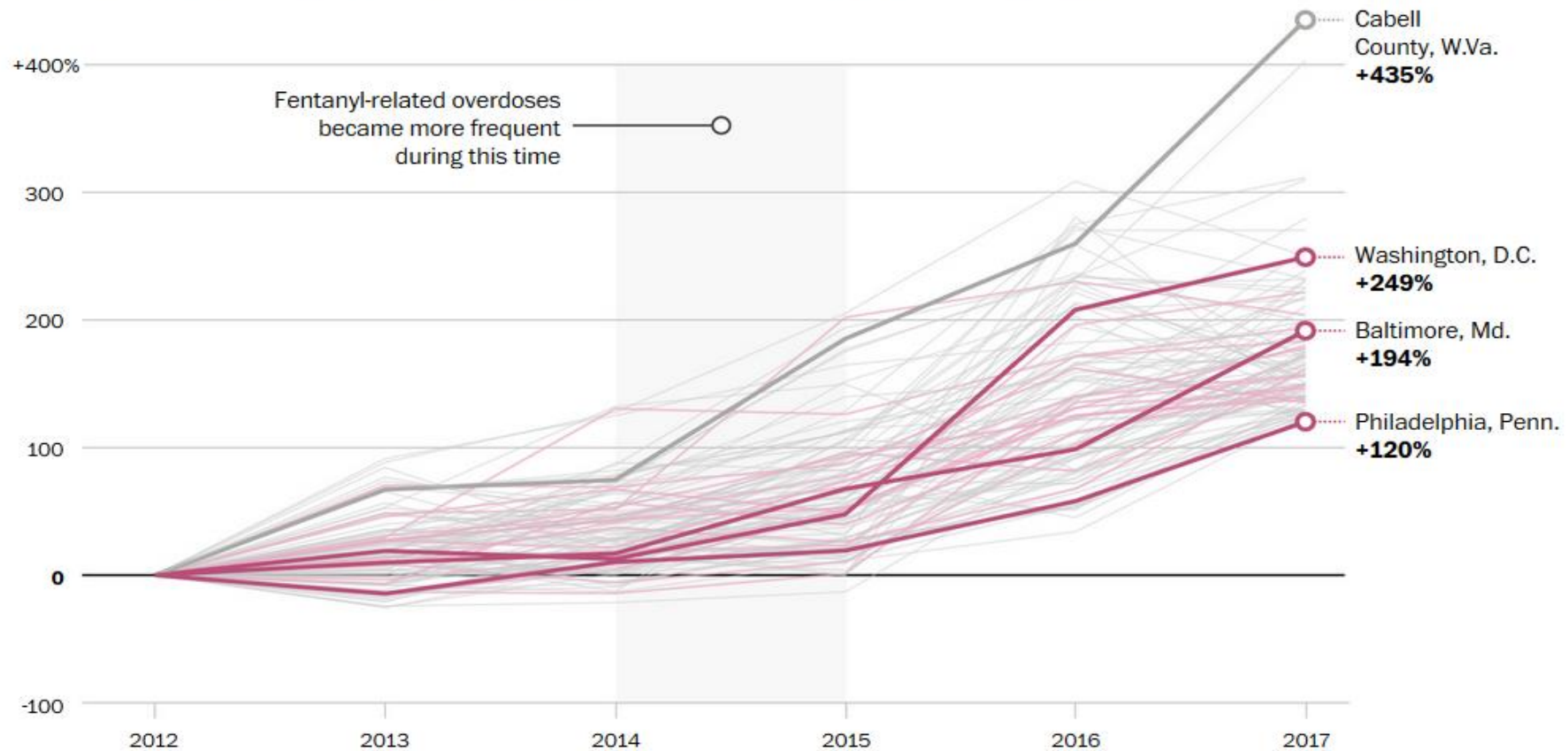
DC SECTION 1115 MEDICAID BEHAVIORAL HEALTH TRANSFORMATION DEMONSTRATION

Alice Weiss, Director, Health Care Policy and Research Administration, DHCF
Medical Care Advisory Committee Meeting
April 24, 2019, 5:30 – 7:00 PM

District Drug Overdose Death Rate Highest Among Urban Counties in 2017

2

Percentage change in age-adjusted overdose death rates since 2012 for **large urban counties** and **other counties**.



Source: Centers for Disease Control and Prevention
KATE RABINOWITZ/THE WASHINGTON POST

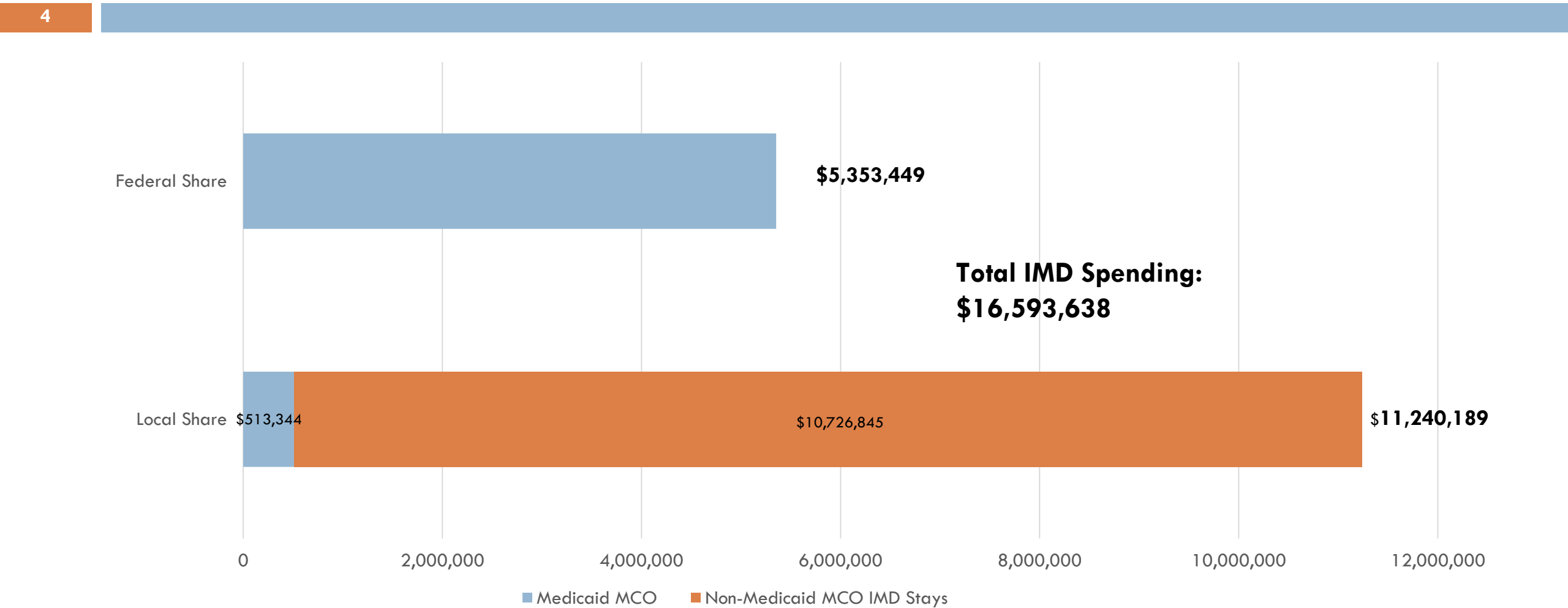
Medicaid Faces Behavioral Health Delivery System Gaps

3

- ❑ Medicaid-covered behavioral health services are overseen by DHCF, MCOs, and DBH
 - ❑ Other DC agencies also involved
- ❑ Overlapping authority has sometimes prompted:
 - ❑ Confusion about coverage
 - ❑ Unclear points of entry
 - ❑ Financing challenges
- ❑ Gaps in coverage/coordination increase health risks for beneficiaries



Nearly 3,000 Medicaid Adults Had IMD Stays in FY18, Resulting in District IMD* Spending Exceeding \$16.5 M



Source: DHCF Analysis of MMIS and DBH Spending Data, FY 18 (Data extracted in March, 2019)

* Excluding IMD stays at St. Elizabeth's Hospital

District Seeking to Expand Coverage, Combat Opioid Epidemic and Integrate Care

5

- Three primary goals for District waiver:
 1. Cover a broader continuum of Medicaid behavioral health treatment for individuals with serious mental illness (SMI)/serious emotional disturbance (SED) or a substance use disorder (SUD)
 2. Advance the goals of the District Opioid Strategic Plan by improving outcomes for individuals with Opioid Use Disorder and other SUDs
 3. Support Medicaid's movement towards more integrated medical and behavioral health care to better coordinate prevention and treatment
- Two phases for Behavioral Health Transformation Demonstration Initiative:
 - ▣ Phase I: Focus on IMD services and ancillary community services and supports
 - ▣ Phase II: Broader Medicaid behavioral health system and service reforms

Proposed New Services: IMD Services

6

- **IMD Services: Demonstration proposes to:**
 - ▣ Allow Medicaid reimbursement for medically appropriate short-term, acute or stabilization inpatient or residential services provided by IMDs to non-elderly adults (21-65 years old)
 - ▣ Create new standards for care:
 - National accreditation standards
 - Require pre-discharge transition planning, connection to community-based services, and follow up within 72 hours of discharge
 - Assessment and treatment of physical health needs
 - Nationally recognized standards of care (e.g., ASAM)

Proposed New Services: Ancillary Community Services and Supports

7

- Adds 4 New Services
 - SUD Residential Services: Adds residential services for children and youth with SUD to current SED residential coverage
 - Clubhouse: Adds peer-partnered social supports program for individuals with SMI to enable community living
 - Recovery Support Services: Adds benefit for individuals either diagnosed or self-identified with SUD, including housing supports, education and life supports and other services to support recovery, which may be provided by certified peer specialists and certified recovery coaches
 - Stand-alone Psychologist and Licensed Clinical Social Worker Services
- Expands Services/Protections Under 5 Existing Services
 - Crisis Stabilization:
 - Comprehensive Psychiatric Emergency Program (CPEP) – expands to SUD and changes rate methodology
 - Mobile Crisis and Outreach – expands units, hours of operation
 - Trauma-Informed Services: Reclassifies and aligns reimbursement for Trauma Recovery Empowerment Model (TREM) and Trauma Systems Therapy (TST) with other trauma-informed services as a way to increase utilization
 - Supported Employment: Expands Medicaid coverage to include vocational services and adds coverage for individuals with SUD
 - Elimination of \$1 Prescription Drug Cost-Sharing: Eliminates \$1 copay for MAT prescriptions
 - SBIRT Pilot: Tests impact of Medicaid coverage for MAT pilot emergency departments and 8 primary care sites

Financial Analysis

8

- Demonstration requires budget neutrality demonstration for approval
- Key components of this demonstration include Medicaid Eligibility Groups (MEGs), person months, and per member per month (PMPM) calculations
- CMS guidance allows states to count new services that could be covered under State Plan or waiver options as a *net zero* in new costs
- Target population = any Medicaid-enrolled individuals with an SMI or SUD diagnosis or self-identified as having an SUD
 - ▣ Fee for Service and Managed Care beneficiaries are included in analysis

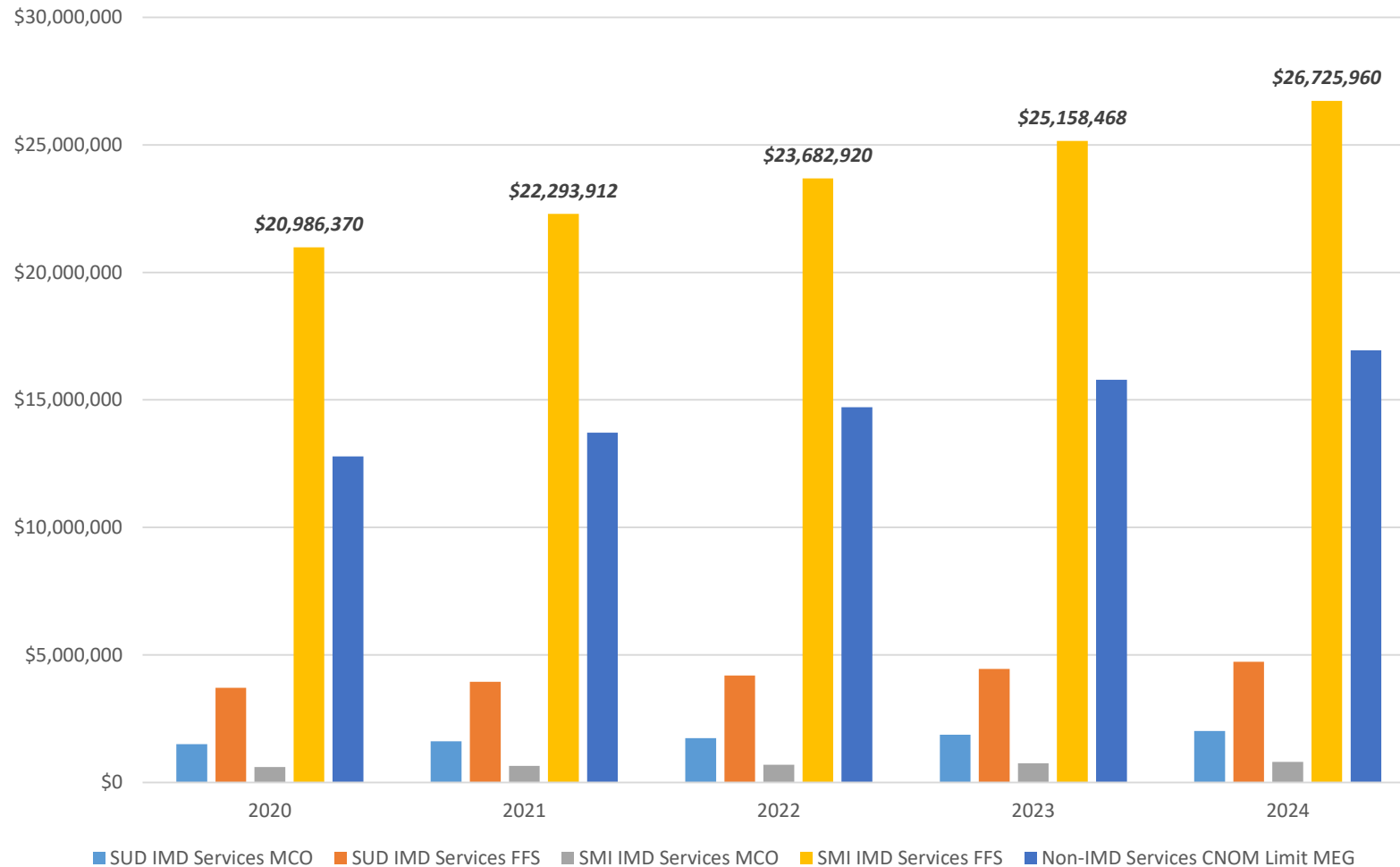
Medicaid Eligibility Groups (MEGs)

9

- This demonstration includes 5 MEGs:
 1. SUD IMD MCO
 2. SUD IMD FFS
 3. SMI IMD MCO
 4. SMI IMD FFS
 5. Non IMD Services (both MCO and FFS) – referred to as Costs Not Otherwise Matchable (CNOM) in CMS documents
- For each MEG, DHCF is using actual experience with individual services billed in each category, then adding them up to calculate a total per member per month (PMPM) figure

Projected IMD Cost by Demonstration Year

10



5 Year Costs:

Total: \$226,026,528

SUD IMD MCO

\$8,724,310

SUD IMD FFS

\$21,016,997

SMI IMD MCO

\$3,485,940

SMI IMD FFS

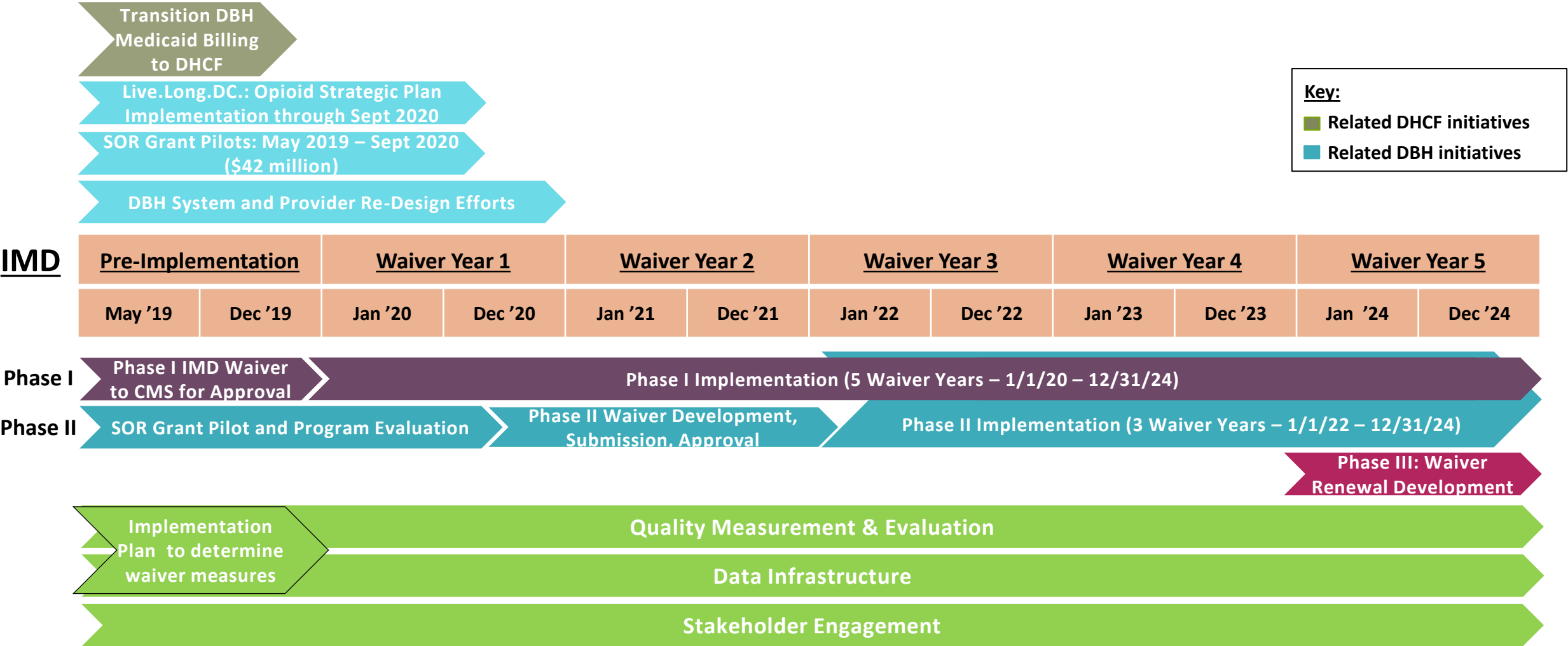
\$118,847,630

Non-IMD Services (CNOM)

\$73,951,651

District Behavioral Health System Waiver Timeline

11



Opportunities for Public Input

12

- Demonstration application published April 12th
 - ▣ Download from 1115 waiver website at: <https://dhcf.dc.gov/1115-waiver-initiative>
 - ▣ Hard copy available: DHCF Main Lobby, 441 4th Street NW, Washington DC 20001
- 30-Day Public comment period: April 12 until 6 PM, May 13, 2019
 - ▣ Comments may be submitted orally at any of the public hearings or in writing to:
 - Alice Weiss, Director, HCPRA, DHCF, 441 4th Street NW, Washington DC 20001
 - dhcf.waiverinitiative@dc.gov
- Three Public Hearings:
 - ▣ Public Hearing #1: April 18, 4:00 – 5:30 PM, DBH Room 284, 64 New York Avenue NW
 - ▣ Public Hearing #2: April 25, 5:30 – 7 PM, Room 2023, 2235 Shannon Pl SE, Washington DC 20002
 - ▣ Public Hearing #3 (Teleconference): April 30, 1:30 – 3 PM, Dial-in: 1-650-479-3208 (PIN: 738 423 593)
Webinar link: <https://dcnet.webex.com/dcnet/j.php?MTID=m8faafc40b618fb1ebbc7d6dbf60bbf08>

Waiver Information

13

- Waiver website: <https://dhcf.dc.gov/1115-waiver-initiative>
 - ▣ Application
 - ▣ Hearing Information
 - ▣ Frequently Asked Questions (FAQ) Document in production
- Email questions/comments to: dhcf.waiverinitiative@dc.gov

14

Comments/Questions?